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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 10/374,360 02/25/2003 *yes in*

** FOREIGN APPLICATIONS ***** *ps in*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY GA	SHEETS DRAWING 4	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>	

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TITLE

Infant feeding veil support

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